File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Stc. 1A

Reset Form

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Dec Moines, Iowa 50319		NS, SEE BACK OF FORM	_		
Fax: 515-281-4073	DISCLOSURE	SUMMARY PAGE			11 All 8: 13
COMMITTEE NAME (Must b	e same as on Statement of Org	anization)			
Committee to Elect Matt V		FORM			
(1)Statewide/Legislative/Judge : (4)County Central Committee (:	of committee you are repositing for: Standing for Retention Cardidate (5)County Cardidate (6)City Card ity PAC (9)City PAC (10)School	2 State PAC (3 State Party idate (7 School Board or Other Politics Board or Other Political Supdivision PAC	al C (DR-2 (Rev. 07/20) For Office Us Comm. #	
CANDIDATE COMMITTEES Candidate Name Matt Walsh	ONLY:	Political Party (if applicable) Nonpartisan		Logged in Scanned	
Office Sought Council Bluffs City Coun	cil	District (if Senate or House)		Audited	
ate reports are subject to pass Market D OWE SIGNATURE OF PERSON FI	2	ursuant to lows Code sections 888.32 H フルジョンゴノ8ド W- <u>Yのスー449-09</u> 8 TELEPHONE		68A.401(3), t	he candidate, for a
AM FILING A January 19 2	2008	REPORT FOR (1) ELECTION	N /(2)NO	N-ELECTIO	N YEAR.
	report date)	Indicate by			
CHECK IF AMENDMENT 1	TO REPORT DATED		Local C	ommittees, en	ter Date of Election
	to file reports until a DR-3 is file			lection is held wattamic	
STATEN	MENT OF CASH ON HAN	D			
committee This am	ning of the reporting period. (To count MUST be the same as the period or must be zero it this is t		***************************************	s <u>3,395</u>	5.22
	Y TAKEN IN THIS PERIOD				
Schedule A: Cash (Contributions total (Attagn Sched	dule A) (*also see in-kind below)	******	354.4	12
		9 F)			
Schedule H: Total S	sales of Campaign Property (Att	ach Schedule H)			
(Schedule	H applies to Candidates' Com	<u>mittees Oniv)</u> Sue-Tôtal,	********	\$ 3,745	5.22
SUBTRACT TOTAL	. MONEY SPENT THIS PERIO	D			
· · · · · · · · · · · · · · · · · · ·) (**also see debts and loans below	-), 1U
Schedule F: Loan F	tepayments total (Attach Sched	ule F)			
CASH ON HAND at the end of	of this reporting period (i) final re	port balance must be zero)		ş <u>1,366</u>	3,46
-UNPAID BILLS (From Sche	eduje D - Attach Schedule D)			\$	
IN KIND CONTRIBUTIONS	(From Schedule E - Attach Sch	edule E)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	
CUTSTANDING LOANS (F	from Schedule F - Attack: Sched	uje F),			
CONSULTANT BREAKDOW	N (Schedule G Attache(i?)			YES	No
CANDIDATE COMMITTEES	ONLY:				
Value of Campaign Pro	PERTY (From Schedule H - Att	ach Schedule H)		s	
STATE COMMITTEES: Subi	mit a reconciled campaign acco	unt bank statement in January of ca	ich year.		

For Instructions, See Back of Form	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)			CK THIS BOX IF NOING FORM
Committee to Blact Matt Walsh			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of Information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V FFOR FUND- RAISER INCOME
11/19/07	CK#	Jeffrey and Cristina Ballenger 12606 Greystone Ct Council Blaffs. IA 51503		\$50.00	
11/19/07	CK# 2573	Harrah's Entertainment Inc, Impact public Policy One Harrah's Court I as Vegas NV 20119		300.00	
11/01/07 thru	CK#	Security National Bank of Omaha 1120 So 101st St Omaha No 18149 Bank acct interest carned		4.42	
	ID# CK#				
	ID#				
	ID# CK#				
	ID#				
	ID#				
	ID#				
	CK#				
	CK#		SUB-TOTAL		
		TOTAL (if last page	·	s 354.42	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consequinity (placed relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no families relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12*, SUITE 1A DES MOINES, IA 50319

Www.iowa.gov/ethics



Form VERIFIED STATEMENT REGISTRATION (Out-of-State Committees) (Rev. 03/05)
For office use only
Сопт.#
Indexed
Audited
Checked
Computer

Out-of-State Committe	Com	n.#	
COMMITTEES NOT ORGANIZED IN 1(3WA TO COMPLETE IN DUPLICATE, SEND A COPY TO THE BOARD WITHIN 19 DAYS OF THE CONTRIBUTION DATE AND			ed
ONE COPY WITH EACH CONTRIBUTION TO THE IOWA COMMITTEE WITH THE CONTRIBUTION. PLEASE REFER TO DETAILED INSTRUCTIONS ON BACK OF FORM.			ked
THIS FORM MUST HE FILED FOR EACH CONTRIBUTE	ON IN EXCESS OF \$50	Comp	
COMMITTEE NAME			
Official Name of Out-of-State Committee (Do not abpreviate co Harrah's Entertainment Inc. Impacts Public Policy	mmilitee name. Written explar	ation must be pi	rovided for Acronym).
One Harrah's Court	g Address		
City, State, Zip Code	Area Code 702-40	& Telephone N	o.
Las Vegas, NV 89119	/02-40	1-0322	
CONTACT PERSON FOR THE COMMITTEE:			
Meredith Hartstern			
Name One Caesars Palace Dr	Las Vegas,	NV 89109	
Mailing Address	City, State	, Zip	
mhartstem@hartahs.com Emell Address (Optional)	702-407-65 Area Code	& Telephone N	umber
Purpose of Committee/Contribution : (Please Indicate by chec	14	-	
STATE OR FEDERAL JURISDICTION WHERE COMMITTEE 8 REGISTERED OR OPERATES	(Use separat	a page if neede	ONSOR OF COMMITTEE d to list more than one entity)
Federal Election Commission	Harrah's Entertains	nent Inc.	
999 E Street NW Mailing Address	One Harrah's Cour	Malling Address	
City State, Zip Code 20463 202-694-1100 Telephone No.	Las Vegas, NV 89	ty State, Zip Co	ode
OWA RESIDÊNT AGENT	IOWA COMMITTEE RE	CEIVING CO	ITRIBUTION
Typed Name of Jawa Resident	N	ame of Commit	
Janac Sternberg Committee to black Matt Walsh Malling Address Malling Address			Walsh
One Harrah's Boulevard 1514 5 kyline Dive Guncil Bluffs, 14 51503			
City, State, Zip Code Area Code & Telephone No. Date If In-Kind Contribution, Describe			
Council Blfs 14,51501 712-329-6032	11/1/07		
100	Amount \$ 300.00	Check# み5フ3	Committee, ID#
	300,00	WU / 3	
PERIFIED STATEMENT OF COMMITTEE:			
Mered. In Flat 15-10 attent that the contribution	n reported above is accurate	and that the in	formation about this out-of-state
ommilion is correct and ecourate to the best of my knowledge. I also attact ubstantially similar to lowe Code section 684.402A, including the disclosura ontribution reported above was made from an account that does not accept ection 684-603, upless the lowe recipient committee is a build issue committe f this form year tipe filed with the lowe Ethics and Campaign Disclosure Board	of all contributions received as contributions from corporations re. I understand that octantial c	nd all expenditure or other prohibi divil and criminal :	se made. I further altest that the lad contributors under lowe Code

11/1/07 (Dale)

FOR INSTRUCTIONS, SEE BACK OF FORM

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Reset	н	\sim	
4/0201	Α.	V141	. 1

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

CHEDULE B (Rev. 07/03)	MONETARY
CHEC	CK THIS BOX IF

AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Matt Walsh

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND AD PRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT
10/29/07	ID# CK#	Quick Mailing Service 2315 N Street Omaha, NE 68107	Labels postage and tax for campaign mailer	\$ 1,499.06
11/26/07	ID# CK#	Hy-Vee 1745 Madison Avenue Council Bluffs IA 51503	CampaignVictory Party refreshments	652.76
11/23/07	ID# CK#	Cellar 19 Wine and Deli 928 Valleyview Dr Suite 19 Council Bluffs, IA 51503	Campaign Victory Party refreshments	231.36
	ID# CK#			
	ID#			
			SUB-TOTAL	\$ 2,383,18

SUB-TOTAL | \$ 2,383,18

TOTAL (If last page of this schedule)

\$ 2,383.18

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to personal entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A,402(3)(j).)

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